STATE OF SOUTH DAKOTA

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SD Secretary of State
2022

Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Timber Lake Topic		2. DATE: 9-24-22
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 51	3B. ANNUAL SUBSCRIPTION PRICE $: 45 & 50
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): PO Box 10 Timber Lake SD 57656		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): PO Box 10 Timber Lake SD 57656		
6. FULL NAME OF PUBLISHER: Kathy Nelson		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME: TLI Publishing / Kathy Nelson — COMPLETE MAILING ADDRESS: PO Box 10 Timber Lake SD 57656		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.: None		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1668	1671
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	119	145
2. Mail Subscription (Paid and or requested)	1113	1114
3. Paid Electronic Copies	218	221
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1450	1480
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	14	15
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	30	20
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1494	1515
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	104	100
2. Return from News Agents	70	56
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1668	1671

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Kathy Nelson
(Signature)

Owner
(Title)

State of South Dakota)
§
County of Dewey)

(Seal)

Sworn to before me this 29th day of Sept., 2022

Deborah Dalsaso
Notary Public

My commission expires: 12-13-2022

Form: SOS REC 051 9/2016